



ASC Utilization Report
State Form 49933 (R3/6-05)
Indiana State Department of Health
Acute Care

Status: Finalized

I. Center Identification

Organization Name: INDIANA SURGERY CENTER - EAST

Street Address: 5445 E. 16th Street

City: Indianapolis

County: Marion

Administrator Name: Lori A. Walton

Administrator Email: lwalton@ecomunity.com

ASC Web Address: www.ecommunity.com

Fiscal Year: 2020

Accredited: Yes No

Name of Accrediting Body: AAAHC

Deemed Status: Yes No

Corporate Tax Status: For Profit Non Profit

II. Identification of Surgical Resources

Number of operating rooms	7
Number of procedure rooms	2

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	6949	10942
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
64493	1606	
66984	885	
30140	828	
64483	568	
64490	442	
62323	313	
64635	248	

20924	202
50590	186
G0206	183

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	2
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